

MDG 2013 COUNTDOWN

Girls and Women Transforming Societies

Theme #1: Leave No-One Behind

Substantial efforts are being made to end extreme poverty and reach the hardest to reach: the very poorest, the geographically remote, those with disabilities and those affected by conflict. Girls and women are disproportionately vulnerable to poverty because they lack property rights and tend to be in the most insecure and vulnerable jobs. Yet, their economic contributions sustain families and communities; women spend more of the income they control on food, healthcare, home improvement, and schooling, which improve outcomes for children and contribute to long-term economic growth. If their constraints are reduced, girls and women can lift themselves, their families, their communities, and their countries out of poverty.



Women working their way out of poverty by running successful businesses. Photo credit: Targeting the Ultra Poor, BRAC

MDG 1 | Changing the Lives of Bangladesh's Poorest

Women in Bangladesh are working their way out of poverty with support from the NGO BRAC. In the last ten years, over 400,000 of the very poorest women have been helped to escape extreme poverty through a UK government backed initiative called [Challenging the Frontiers of Poverty – Targeting the Ultra-Poor](#).

Under the program, the poorest 10% of women are identified from local communi-

ties and mentored to help increase their incomes and raise their voices in their communities. The scheme assists women to start their own businesses, learn key business and life skills, increase their confidence, and understand their rights.

The program has produced remarkable results; 95% of women have graduated from the initiative with a stable income and 98% of households now have cash savings. Women have created local shops, wood enterprise companies, plant nurseries, and leased fields for rice cultivation. This has increased respect for women within their communities and discouraged families from marrying their daughters early. The program is being implemented in ten other countries.

MDG 4/5/6 | Reaching out to the Remote in Indonesia

The “Guiding Lights of the Archipelago” (Pencerah Nusantara) program is an initiative by the Indonesian government to accelerate progress on the health MDGs by

sending groups of health professionals and advocates to some of the most remote islands in Indonesia.

Lack of access to adequate health facilities has contributed to high maternal mortality rates in some parts of Indonesia. The primary cause of death is hemorrhage and infections – preventable if a trained medical worker is present.

Education levels are low, nutrition and sanitation is poor, and many village myths – especially about childbirth – still dominate the communities.



Healthcare workers in training to help families in the Indonesian archipelago. Photo credit: Office of the Indonesia President's Special Envoy on MDGs

Healthcare teams (including a doctor, nurse, midwife, and public health worker) stationed in these remote locations work with communities and local governments to address the needs of women and their families and ensure that no-one is left behind.

MDG 2 | Educating Girls in Afghanistan

During the rule of the Taliban, girls were barred from attending school. Today, 37% of students enrolled in Afghan schools are female. Between 2002 and 2012, the Afghan government, with help from USAID, has built 4,000 schools, recruited 175,000 teachers, and supplied over 100 million books. As a result, the number of children enrolling in school has nearly doubled.

USAID has helped strengthen the existing system run by the Afghan government to improve training and education. Teachers have received basic education training and support, and a human resources management system has been created to encourage teaching as a career, especially among women. Overall, out of those who have trained as Ministry of Education teachers, 31% are women.

Just one extra year of primary schooling for girls can increase their wages by up to 20%, and with secondary schooling, wages increase even higher. To help compensate for years of missed education under the Taliban, girls are supported through a



Photo credit: Alejandro Chicheri / WFP

special intensive education scheme to learn two years of schooling in just one year. Now, 85% of Afghans rate the government's performance in education as good or very good.

Theme #2: Women's Leadership in Health

While women continue to bear the brunt of many health problems globally, they are leading the way – inspiring improvements in healthcare and saving lives. Women are powerful role models for new generations of girls, and their skills help babies and children lead happy, healthy lives.



Kangaroo Mother Care in the Dominican Republic. Photo credit: USAID

MDG 4 | A Promise Renewed: Kangaroo Mother Care in Dominican Republic

Addressing newborn mortality is crucial if the country is to achieve MDG 4 – reduce child mortality by two-thirds between 1990 and 2015. Improving proven interventions to save newborn lives is vital to attain the ambitious, but achievable goal of the *Child Survival Call to Action* and ending preventable

child deaths. In the Dominican Republic, incredible results are being achieved in ending preventable child deaths: a 21% reduction in national infant mortality between 2012 and 2013 – from 2,366 to 1,877 infant deaths – comparing the same periods of the year.

Experience shows even with limited resources, local efforts can save the most vulnerable babies. The San Vicente de Paul Hospital in San Francisco de Macoris in the Dominican Republic had one of the highest rates of newborn mortality in the country. To address this, hospital staff established the Kangaroo Mother Care program – a proven intervention to provide effective care and follow-up to premature and low birth weight babies, through skin-to-skin contact, promotion of breastfeeding, and close follow-up of mother and baby.

Supported by USAID's Maternal and Child Health Integrated Program (MCHIP), Kangaroo Mother Care gives the mother a central role in the health of her vulnerable

newborn, and creates supportive groups among mothers and within families. Initially operating out of the tiny office of Nurse Lucy Reyes, the hospital and the program reduced newborn mortality by almost 50%, after only three years of implementation. The work of female nurses, doctors, and psychologists has been integral to this success. The hospital is now a training center and has supported teams to set up Kangaroo Mother Care programs in three other national priority hospitals for reducing newborn mortality. The first of these new hospitals already reduced newborn mortality by 30% – a reduction from 31.6 newborn deaths per 1,000 live births in 2011 to 22 newborn deaths per 1,000 live births in 2012.

MDG 5 | Saving Mothers, Giving Life in Uganda and Zambia

Despite significant progress, maternal mortality remains one of the leading causes of death among women of reproductive age in developing countries. In sub-Saharan Africa,



Safe Motherhood Action Groups work in Zambian communities to encourage women to deliver in health facilities. The risk of death from pregnancy-related complications is far greater when women deliver at home. Saving Mothers, Giving Life partners provide extensive training and support for these Groups in four districts in Zambia. Photo credit: Saving Mothers, Giving Life / 2013

where many women deliver without skilled care, giving birth can be especially perilous.

Supporting the commitments that Uganda and Zambia have made to improve maternal health, USAID, through [Saving Mothers, Giving Life](#) works at the district level to address the three most dangerous delays pregnant women face in childbirth: the delay in deciding to seek care for an obstetric emergency, the delay in reaching an obstetric facility in time, and the delay in receiving quality care when a facility is reached.

After a year, the results are encouraging. In Uganda, the number of women delivering in facilities increased 82% between January

2012 (2,585) and December 2012 (4,707). In Zambia, the number of women delivering in all levels of health centers increased 44% between June-December 2011 (5,472) and June-December 2012 (7,863). Interventions include awareness raising; improved transportation and communications networks; increased number of hired, trained, and equipped birth attendants; and a rising number of facilities performing newborn resuscitation.

MDG 6 | Tackling Tuberculosis in Ethiopia

Women across Ethiopia are taking the lead in combating tuberculosis (TB). The government of Ethiopia is working with the UK government and the Global Fund, to Fight AIDS, Tuberculosis and Malaria by training 37,000 women as health extension workers (HEW). These women, who are selected from their communities, are provided with training in 17 different health “packages,” from sanitation and hygiene to AIDS education. Thanks to the HEW program, more than 90% of Ethiopia’s population now has access to healthcare.

TB is a major public health concern in Ethiopia, and it is a large part of the workload

for these health workers. HEWs provide supervision during the treatment period, visiting patients at their homes. But cultural and geographical barriers to treatment for TB remain, particularly for women.

A new project – Global Fund TB REACH – is training HEW to provide diagnostic and treatment services in the home. As a result, women now have the same access to TB services as men. TB notifications in the project area have doubled and HEWs report increased job satisfaction, as well as greater respect from their communities. This pilot project is now being expanded nationally.



Female health extension workers at a health post in Bolosso Sore district, Ethiopia. Photo credit: Global Fund / John Rae

Theme #3: The Power of Technology

Technology can create lasting, global change. Women around the world are harnessing the potential of new technologies to make significant improvements to their lives and their society and to help tackle climate change. But too many women still don’t have this opportunity. One estimate suggests that women are 21% less likely to use and own mobile technology than their male counterparts. By connecting girls and women to the wider world, they can access the information and tools they need to create a brighter future for all.

MDG 7/8 | Safe Drinking Water for Kenyans

17 million people across Kenya lack access to safe drinking water. Women are disproportionately affected as they are primarily responsible for collecting and treating water. [Vestergaard Frandsen](#), a “profit for a purpose” organisation, has created a program to treat water, improve

Margaret (far left) with several of her volunteers and a teacher (pictured with the LifeStraw) who was affected by the 2011 floods and helped to filter water for those staying in the camps. Photo credit: Vestergaard Frandsen Inc.

hygiene, and safely store water. It reaches 4.5 million people across Kenya by distributing LifeStraw Family water filters, alongside hygiene education and training to maintain the filters. The water filters are



distributed free with the funding coming from carbon credits; using the filters reduces the need to burn fuel to boil and sterilise water.

88% of those responsible for filtering water for their families are women and the water filters have dramatically changed women's lives. Those taking part in the program reported a reduction in typhoid and reduced cost of treating family members for the disease. Women are able to reinvest this money into farming, books, and school fees.



Female entrepreneurs are providing light and kerosene smoke-free environments for families, schools, and businesses. Photo credit: Lighting a Billion Lives, TERI

MDG 7 | Lighting Lives Throughout India

Around 290 million people in India do not have access to electricity. The [Lighting a Billion Lives](#) (LaBL) program, with support from the UK government since 2011, has created a sustainable energy project that has brought light to over one million people and over 2,500 villages since 2008.

The program trains and empowers villagers, with a particular focus on women, across rural India to run Solar Charging Stations, providing light and energy to local communities. Women rent solar lanterns for a monthly fee to households, schools, and small businesses. The lanterns provide better light and kerosene smoke-free environments, improving the health and lives of communities.

The solar lanterns mean children can take part in physical activities after school, knowing they can return home to complete their homework in the evening. Health workers can visit and treat the sick during night time hours and midwives can illuminate rooms, enabling women to give birth in a safer environment. LaBL has made important steps towards increasing women's business opportunities and creating a better and safer world.

MDG 8 | Mobile Phones Transforming Women's Lives in Iraq

Mobile technology is now connecting women to services and opportunities throughout the developing world. The [GSMA mWomen Program](#), a global development alliance between USAID, GSMA, AusAID and Visa, aims to increase women's access to mobile phone technology to meet their livelihood needs, while reducing the mobile phone gender gap.



Photo credit: GSMA mWomen

Based in Iraq, Asiacell has been a key mobile phone operator under the program. In early 2011, the percentage of women making up Iraqi mobile users for Asiacell stood at 20%, making it one of the largest mobile phone gender gaps in the world. Asiacell decided to completely shift its strategy for reaching Iraqi women. Instead of modifying existing products, it set about designing and launching a new offering – the *Almas* (meaning 'Diamond' in Arabic) line – which would have unique features to match the needs of Iraqi women.

Two and a half years later, more than two million women have signed up for the *Almas* line. They now represent more than 40% of Asiacell's overall subscriber base - over 4.3 million women total.

For more information, please visit <http://www.usaid.gov/mdg> and <http://www.gov.uk/government/news/mdg-countdown-2013>